File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073



PM 1. 22.08 PM 1:16

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Stateme	nt of Omenization)	7	
		FORM	
IMPORTANT: Indicate by # type of committee you are rep. (1) Statewide/Legislative/Judge Standing for Retention Ca. (4) County Central Committee (5) County Candidate (6) Subdivision Candidate (8) County PAC (9) City PAC (10) Local Ballot Issue	andidate (2)State PAC (3)State Party	(Rev. 07/2	(007) REPORT
CANDIDATE COMMITTEES ONLY:		Comm. # _	
Candidate Name	Political Party (if applicable)	Logged In	
Office Sought	District (if Senate or House)		
Late reports are subject to possible civil and criminal pendonal p	alties. Pursuant to Iowa Code sections 68B.32A(7		
2 2 4			TE SIGNED
I AM FILING A 2007	REPORT FOR (1) ELECTION /(2	NON-ELECTIO	N YFAR
(report date)	Indicate by #	2	
\supseteq CHECK IF AMENDMENT TO REPORT DATED $__$			
		ai Committees, en	ter Date of Election
☐ Check if this is final (termination) report and attach (You must continue to file reports until a DR-	Notice of Dissolution Form DR-3.	unty & Local Comm	ittees, enter County in
	whi	ch Election is held	or of the second
CTATEMENT OF CACH CH			
STATEMENT OF CASH ON			
cash on Hand at the beginning of the reporting period committee. This amount MUST be the same of the last constitution assistant.	od. (Total of all funds held by the		~4
of the last reporting period or must be zero if	as the cash on hand at the end this is first report filed)	• 2	770 31
or the last reporting period or must be zero if	this is first report filed.)	\$	279 =
ADD TOTAL MONEY TAKEN IN THIS PERIOR	this is first report filed.)	\$ F	279 31
ADD TOTAL MONEY TAKEN IN THIS PERIOR Schedule A: Cash Contributions total (Attach	this is first report filed.) OD Schedule A) (*also see in-kind below)	\$ <u>\$</u>	279 31
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
MAHASKA CO: Republican Central Committee

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	T DEL TELOUIS		
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK	ABBRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND-
	NUMBER ID#		(ii applicable)	100	RAISER INCOME
100		Canotemore.	Bornes.	\$112.90	8
	ID#				
3-22-07	CK#	an idemized	none	172 90 83,69	V
_	ID#	un ikmised			
7-24-07		Southern Towa Fair	none	83,69	U
	ID#	discount, PRELISE , IMAGING			
8-24-07		discount, PRECISE IMAGING 717 ligh DW. W Oshaloosa, Jown 52577	none	12,99	
	ID#				
i	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	1 / 12	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____of___ (for Schedule A)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

MAHAS	KA Cou	NTY-REP. CENTRAL	COMMITTEE	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-27 08	ID# CK#/046	Louthern Fowar Fair, Orkaloosa IA	Rental Cooth	\$ 16500
1-25	ID# CK# <i>104</i> 3	Supplies, Food Read quarters now ob election	Pat Scanlon 2512 Octom Av	6400
1-27	CK#1044	Don Racheter Bresentation Traveling Esupera	Constitution of the USA and	8000
1-27	CK#1045	CARMEN RETTSMA 1125 Kent av Maro	Republican Cocation Head quarter 2006	~ 5468
4-26	ID# CK# 104 7	CARMEN REITSMA 1125 Venx av new Charon 50207	mailing postage mently meeting Rept Commistee	32/0
729	ID# CK# 1048	Mc Cloud & Cowafer Lystems	pars : County Stair	50 06
8-3	1D# CK# 49	mblic ymaging	Precise Imaging 717 high do well OSKA ZOOSA 52577	80 00
8-28	ID# 105-0 CK#	gay Forc 26:5 305 Ar. 26:5 SKALOOSA 525	aluminum Pole and american Flag 7 Door price	19805
			SUB-TOTAL	\$71389

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

TOTAL (if last page of this schedule)

19902233	333 B	4300000	200000000	CORNEL
1399333				8333
82260 (100)	60% 004	1882 5.00	13 x 6 8	200
2000000	o some of			2000

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
Maka	rska Coun	Ay Republican Centra	I Committee	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2	ID#	PRECISE IMAGIN	CHAME and GAME	
7-3	CK#	717 HIGH AV. W. OSKALUOSA 52577	RULES SOUTHERN TOWA FAIR \$70,9	\$
7-18	ID#	1111-111 3211	TECKNO GRIP PEN	
07	CK#	14	door prises \$33000	
7-18	ID#		art charge Let up	
07	CK#	11	Apriles. \$ 88.93	
	ID#		PRINTING FAIR	
11	CK#	n	ANNOUNCE MENTS	
8-24	ID# CK#/05/	,	Total above all paid by check is	47884
12-13	ID#	CARMEN REITSMA	Secreatary cost	
07	CK#/052	new Sharon 50207	meeting dates	6598
12-14	ID# /053 CK#	OSKALOUSH DALY HERALD and SHOPPER(2X2)	MAHASKA COUNTY	555-40
	ID#			
	CK#			

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

Page _____ of _____

TOTAL (if last page of this schedule)